

- Title **CLIENT CONTACT PERSON**
- Creation
 - Date May 7, 2001
 - Contact Sherland Jordan of CDSS
 - Email address Sherland.Jordan@dss.ca.gov
- Revision
 - Date June 25, 2001
 - Author Sonya Kinanahan of CDSS
 - Phone number #916-657-2067
 - Email address Sonya.Kinanahan@dss.ca.us

I. Introduction

This template is designed to help any government entity required to comply with the Health Information Portability and Accountability Act (HIPAA) administrative requirements in designating a contact person or establishing an office for their organization.

II. Purpose

The purpose is to describe the basic requirements expected of the contact person or office responsible for receiving the entity's client complaints and further information as specified in section 164.520 concerning notice of privacy practices for protected health information.

A. Specific HIPAA requirements/standards addressed

The requirements are for a covered entity to designate a contact person or office that is responsible for receiving client complaints and able to provide further information and/or handle inquiries about clients right to notice of privacy practices for protected health information and the entity's policies and procedures.

B. Areas that template should be utilized

The areas in this template should direct requirements expected of a contact person, department designee or office.

This template will not address which classification position or salary range to use for the contact person, department designee or office. The government entity needs to develop a statement of duties, responsibilities, and requirements. At the very minimum, a contact number and address should be established for clients to submit their complaints and/or inquiries.

C. Cite any pertinent references

Federal Register dated December 28, 2000, 45 Code of Federal Regulations, Parts 160 and 164, on Standards for Privacy of Individually Identifiable Health Information. The final rule is to comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA) requirement for use and disclosure of individually identifiable health information, and requires government entities to designate a contact person or office.

State Government Code Section 11019.9, relating to privacy, requires each state department and agency to enact and maintain a permanent privacy policy. Passage of Senate Bill 129 (SB 129) created in the Department of Consumer Affairs an Office of Privacy Protection under the direction of the Director of the Department of Consumer Affairs and the Secretary of the State and Consumer Services Agency. The office's purpose is to protect the privacy of individuals' personal information in a manner consistent with the California Constitution by identifying consumer problems in the privacy area and facilitating development of fair information practices in accordance with the Information Practices Act of 1977. This also requires the Office to ensure that state agencies have appropriate privacy policies to assure consumer protection in the areas of personal information and privacy.

In addition to the State Constitution, there are two commonly cited bodies of California Law, the Information Privacy Act, and the Public Records Act. These laws define the framework within which state government will operate and define specific rights of citizens to approve and review how California Government uses their information.

The California Public Records Act provides for the right of individuals to privacy, finds and declares that access to information concerning the conduct of the people's business is a fundamental and necessary right of every person in California.

State law identifies exemptions to the California Public Records Act, and specifies that after January 1, 1999, each addition or amendment to a statute that exempts any information contained in a public record from disclosure must be listed and described, as specified.

State law allows every State agency to adopt regulations concerning procedures to be followed when making its records available in accordance with this section. This section specifies state and local entities required to establish written guidelines for accessibility of their records and how the information will be posted and made available upon request and free of charge to any person requesting the specified entity's record information.

The Information Practices Act (IPA) of 1977 (Civil Code Section 1798 et. seq.) is designed to protect personal privacy by putting limits on collecting, maintaining and distributing personal information by State agencies. The IPA applies to personal information maintained by State agencies and their agents. It gives individuals the right to review their personal information in State agency records, find out who has had access to the information, and request changes to inaccurate or irrelevant information.

State agencies subject to the IPA must comply with several requirements. These requirements generally include responding to an individual's request for personal information in a timely manner, tracking disclosures of information, and providing notification to individuals about how the agency will use the information collected. The intentional violation of any provision of the IPA by an employee of the Department is cause for discipline, including termination of employment.

Local agencies are not subject to the IPA. In addition to the cited references, the United States Constitution and enacted federal legislation such as the Federal Privacy Act of 1974, collectively create a web of requirements and practices that reinforce privacy as an overriding issue for local and state government.

III. Assumptions

Entities collect protected health information from clients or beneficiaries. Every access to that information can be audited and/or documentation must be maintained for audit purposes. If a client or beneficiary feels that protected health information collected by the entity has been compromised, they may contact the designated contact person, department designee or contact office. Once a complaint and/or inquiry is received by the contact person, the complaint must be investigated and a response must be provided to the complainant. A record of the entity's response must be retained for audit purposes. The contact person/office will maintain a record of all complaints and their disposition.

Administrative remedies shall be established by the entity to ensure:

- No retaliation against any individual who files a complaint or opposes any act made unlawful by the regulation.
- Processes are established to address improper use or disclosure of PHI and prevent recurrence.
- Sanctions are developed for persons who fail to comply with the policy and procedures of the Entity and obligations imposed by the Rules.

IV. Pre-requisites

To ensure compliance, the Standards for Privacy of Individually Identifiable Health Information require that an entity must designate a contact person or establish an office that is responsible for handling privacy complaints and/or inquiries. The Contact Person shall be provided the most current policies and/or revision to policies or practices to ensure accuracy of information and responses provided.

V. Constraints

Additional administrative support within a reasonable period of time to handle complaints and/or inquiries about protected health information and the entity's policies and procedures regarding notice of privacy practices for protected health information, if necessary.

VI. Dependencies

A complaint or customer/client service process must be developed, where all complaints or customer/client inquiries or requests are received, documented, resolved and reviewed to improve the service process, as needed.

VII. Process

The contact person/office will handle complaints, inquiries, and requests for information originating by mail, telephone, and personal interview or contact from the following sources: public agencies, local government, businesses, and the general public.

Recommend that a toll-free telephone number accessible to all California Residents, with multiple translators and/or translation software be available, and toll-free TDD telephone number for the hearing-impaired populations be established to meet ADA requirements (*NOTE: There will be costs associated with implementing toll-free numbers, TDD equipment or services, and providing translation services or software.*)

Information and referral service includes an assessment of the customer's needs and a determination of how the call (contact) should be handled when the issues involve the department contacted, or whether a referral to another federal, state, county, or local agency is appropriate.

INTERNET COMPLAINTS/COMMENTS

The Citizen Complaint Act of 1997 (AB 206) mandates all State agencies that have an Internet Web site make available a complaint form for citizens to submit complaints or comments electronically or in hard copy form regarding the agency's performance.

Internet sites should make clear reference to the contact person, department designee or office as it relates to HIPAA compliance and provide the required complaint form.

DRAFT FOR COMMENTS

This is a HIPAA readiness document authored by the State HIPAA Workgroup. Information presented is accurate to the best of our knowledge. Information identified as related to or authored by someone other than the Workgroup has not been verified for accuracy. Unless noted otherwise, this is a working document. All material must be viewed in the context of your own organization and environment. Legal opinions or decision documentation may be needed to apply/interpret it.

Docum HIPAA_clnt_cont_010629

The contact person, department designee or office will review all incoming e-mail complaints and/or inquiries, and either respond to the complaint or inquiry within its areas of responsibility or forward the complaint or inquiry to the appropriate respondent. Control procedures must be implemented to ensure responses are provided in a timely and satisfactory manner.

VIII. Procedures

The contact person/office will handle complaints, inquiries, and requests for information originating by mail, telephone, and personal interview or contact from the following sources: public agencies, local government, businesses, and the general public. The contact person, department designee or office will either respond to the complaint or inquiry within its areas of responsibility and/or forward the complaint or inquiry to the appropriate respondent. Control procedures must be implemented to ensure responses are provided in a timely and satisfactory manner.

The contact person/office will maintain a record of all complaints and their disposition.

Guidelines

Each Notice of Privacy practices for protected health information, as described and required by Section 164.520, must incorporate contact information regarding the contact person, department designee or office information. Information should include, at a minimum:

HIPAA Contact Person Office
Telephone number
Fax number
TDD number
Mailing Address
Electronic mail address information
Hours of Business Operation

For Internet web-sites, this information should be readily visible and available to the general public and also meet Americans with Disabilities Act ADA requirements. Instructions shall be provided for obtaining interpreter services if needed. It is also recommended that notifications regarding privacy rules be included when furnished to the public, business contact agencies, etc. include the contact person, department designee or office information.

Contact person or the department designee shall:

Maintain current knowledge of applicable federal and state privacy laws, and the Privacy Policy of the entity.

Prerequisites:

To ensure that only current practices, policies and procedures are provided, the Contact Person or Office must be provided with the current policies and/or any revisions to the entity's policies or practices.

Assumptions:

Administrative remedies shall be established by the entity to ensure:

- No retaliatory actions against any individual who files a complaint or opposes any act made unlawful by the regulation will be taken
- A response mechanism or process is established within an organization to respond to privacy incidents

IX. Accessibility of information

This template should be available in every entity that creates or receives protected health information.

X. Compliance criteria

All complaints or customer/client inquiries or requests received must be documented. Each response provided to the customer/client must be reviewed and documented to improve the service process and to ensure privacy compliance.

XI. Risk (risk if no compliance)

Rapid appointment of a contact person or department designee will address immediate customer service issues, allow effective planning, training, and implementation.

XII. Auditing Criteria

The contact person or department designee must provide a record of all client complaints and/or inquiries received to the designated privacy official and/or department designee.

XIII. Template change management process (maintenance)

The entity's administration, personnel, and Legal Counsel should update the template and share the information with those entities that created this template.

XIV. Approval policy

A covered entity must document the personnel designations for the client contact person or department designee.

XV. Disclaimer

The information in this template is for general information purposes only. It is not intended to provide legal advice to any entity. Please consult with your Legal Counsel before taking any action based on information appearing on this template.